

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	70255	2-8-00
O.I.P.E. CLASSIFIER		48	3/1/00
FORMALITY REVIEW		14417	4-4-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	3/1/28
2	✓	✓	3/1/28
3	✓	✓	3/1/28
4	✓	✓	3/1/28
5	✓	✓	3/1/28
6	✓	✓	3/1/28
7	✓	✓	3/1/28
8	✓	✓	3/1/28
9	✓	✓	3/1/28
10	✓	✓	3/1/28
11	✓	✓	3/1/28
12	✓	✓	3/1/28
13	✓	✓	3/1/28
14	✓	✓	3/1/28
15	✓	✓	3/1/28
16	✓	✓	3/1/28
17	✓	✓	3/1/28
18	✓	✓	3/1/28
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25	✓	✓	3/1/28
26	✓	✓	3/1/28
27	✓	✓	3/1/28
28	✓	✓	3/1/28
29	✓	✓	3/1/28
30	✓	✓	3/1/28
31	✓	✓	3/1/28
32	✓	✓	3/1/28
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45	✓	✓	3/1/28
46	✓	✓	3/1/28
47	✓	✓	3/1/28
48	✓	✓	3/1/28
49	✓	✓	3/1/28
50	✓	✓	3/1/28

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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